2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40685

FILED Mar 09, 2010 Secretary of State

Entity Name: GULF COAST COMMUNITY HOSPITAL STAFF LIBRARY FUND, INC.

Current Principal Place of Business: New Principal Place of Business:

449 W. 23RD ST

PANAMA CITY, FL 32405 LIS

Current Mailing Address: New Mailing Address:

PO BOX 15309

PANAMA CITY, FL 32406 US

FEI Number: 59-2171911 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RAMIE, GEORGE D.O. ZABIH, ISMAIL MD 449 W. 23RD ST 449 W . 23RD ST

PANAMA CITY, FL 32405 US PANAMA CITY, FL 32405 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

in the State of Florida.

SIGNATURE: ISMAIL ZABIH, MD 03/09/2010

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

KENAWY, EEHAB MD Name: Address: 449 W 23RD ST City-St-Zip: PANAMA CITY, FL 32405

Title:

Name: TRAN, QUANG M Address: 449 W 23RD ST City-St-Zip: PANAMA CITY, FL 32405

Title:

CAMPBELL JR., WILLIAM MD Name:

Address: 449 W 23RD ST

City-St-Zip: PANAMA CITY, FL 32405

Title:

Name: TAYLOR, MICHAEL MD Address: 449 W 23RD ST City-St-Zip: PANAMA CITY, FL 32405

Title:

MALAMUD, FERNANDO MD Name:

449 W 23RD ST Address:

City-St-Zip: PANAMA CITY, FL 32405

Title:

SIMPSON, SHAWN D.O. Name: Address: 449 W 23RD ST PANAMA CITY, FL 32405 City-St-Zip:

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: W. GREGORY FRENCH CPA 03/09/2010